

# CITY OF SALINA BENEFIT SUMMARY

## Classified Full-Time Employees

Effective 02/01/2010

<b>CAFETERIA PLAN</b>	ASI administers the City of Salina Cafeteria Plan, which allows employees to pay for specified benefits with pre-tax wages. AFLAC administers supplemental insurance policies: Accident, Cancer, and Short-term Disability.	
<b>HEALTH INSURANCE</b>	<p><i>Includes medical, prescription, and dental coverage.</i></p> <ul style="list-style-type: none"> <li>The total monthly premium for a single policy is \$416.00. The employee share is \$84.00 per month; the City contributes the remaining \$332.00 per month.</li> <li>The total monthly premium for a family policy is \$1,118.00. The employee share is \$227.00 per month; the City contributes the remaining \$891.00 per month.</li> </ul> <p><b>MEDICAL: Blue Cross &amp; Blue Shield of Kansas</b></p> <ul style="list-style-type: none"> <li>Deductible: \$250 per person, \$500 maximum deductible for the family each benefit period.</li> <li>Co-insurance: After deductible is met, the plan pays 80% of allowed charges. When employee share equals \$1,000 (individual), with a max of \$2,000 (family), the plan pays 100% of all allowed charges, subject to a lifetime maximum benefit of \$2,000,000.</li> </ul> <p><b>PRESCRIPTION: CVS-Caremark</b></p> <ul style="list-style-type: none"> <li>Covered prescriptions are paid at 70% with no deductible.</li> </ul> <p><b>DENTAL: Delta Dental of Kansas</b></p> <ul style="list-style-type: none"> <li>Annual deductible is \$25 per person or \$75 per family for items not covered at 100%.</li> <li>Maximum benefit payment for each eligible person per benefit year is \$1,500.</li> </ul>	
<b>HOLIDAYS</b>	Eleven paid holidays per year plus one paid personal day (8 hours per day).	
<b>LIFE INSURANCE</b>	The City pays the full cost of a life insurance policy from Lincoln Financial Group, equal to the employee's annual rate of pay, with minimum coverage of \$20,000. Spouses are covered for \$15,000 and dependent children for \$10,000 ( <i>age restrictions apply</i> ). KPERS-eligible employees receive life insurance with coverage equivalent to 1.5 times the employee's annual salary. KP&F-eligible employees receive death benefits payable to the spouse and/or eligible children for Service-Connected death and Non Service-Connected death, based on a percentage of the employee's final average salary. <i>If the employee does not have a surviving spouse or eligible children, the designated beneficiary receives a lump sum payment equal to the employee's current annual salary.</i> Employees may also elect to purchase Optional Group Life insurance.	
<b>LONGEVITY PAY</b>	After five years of continuous employment, employees will receive an annual payment equal to \$3.50 for each month of service if their overall performance rating has been 'good' or higher on annual evaluations (pending City Commission approval). If paid, longevity shall be distributed to employees by December 15th.	
<b>RETIREMENT</b>	All classified employees (except uniformed police and fire personnel) are enrolled in the Kansas Public Employees Retirement System (KPERS) upon employment. Benefits include retirement, life insurance, and disability. Uniformed police and fire personnel are enrolled in the Kansas Police and Fire Pension System (KP&F) upon employment. Benefits include retirement, service-connected death, non service-connected death, and disability.	
<b>SAVINGS PLANS</b>	Employees may elect to participate in a 457k (deferred compensation) savings plan through ICMA Retirement Corporation. Other savings options include Roth IRA and Learning Quest.	
<b>SICK LEAVE</b>	Eight (8) hours per month of service (unlimited accrual). Payout of 1/3, after 5 years of service in good standing, upon separation.	
<b>TRAVEL &amp; TRAINING</b>	The City will cover the cost of certain approved work-related workshops and conferences. Professional society dues, registration fees, and tuition expenses may also be paid and/or reimbursed.	
<b>VACATION</b>	0 – 4 years of service 5 – 9 years of service 10 – 19 years of service 20 years +	80 hours vacation per year 96 hours vacation per year 128 hours vacation per year 160 hours vacation per year
<b>WELLNESS</b>	<p>Employees are eligible to join the YMCA at reduced rates. Membership rates are as follows: \$37.25 per month for single; \$54.30 per month for family. The dues can be set up as a payroll deduction that occurs monthly on the 5<sup>th</sup>.</p> <p>Twice per year, employees and their spouses may have a <b>FREE</b> CHD blood profile done at the ComCare lab on Elm Street. No appointment is required, but you will need to show your City I.D.</p> <p><b>FREE</b> immunizations for Influenza (flu), Tetanus, and Hepatitis B are available through the Health Department for employees and their spouses. <b>FREE</b> childhood immunizations that are required by the public school system are also available through the Health Department for dependent children of City employees.</p>	

*Benefits are subject to change by state and local officials. For specific details, refer to the employee Personnel Manual or contact the Human Resources Department. This Benefit Summary is neither a contract nor the basis for an implied contract between the City of Salina and any employee or group of employees*

Revised 01/20/2010